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**\*BIBDATASHEET\***

CONFIRMATION NO. 4425

Bib Data Sheet

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/727,023 | <b>FILING OR 371(c)<br/>DATE</b><br>12/02/2003<br><b>RULE</b> | <b>CLASS</b><br>445 | <b>GROUP ART UNIT</b><br>2879 | <b>ATTORNEY<br/>DOCKET NO.</b><br>58390US004 |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/443,274 01/27/2003 and claims benefit of 60/443,232 01/27/2003  
 and claims benefit of 60/443,235 01/27/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 03/03/2004

|  |                                   |                                |                               |                                    |
|--|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | <b>STATE OR<br/>COUNTRY</b><br>MN | <b>SHEETS<br/>DRAWING</b><br>9 | <b>TOTAL<br/>CLAIMS</b><br>16 | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                   |                                |                               |                                    |
| Verified and<br>Acknowledged   | Examiner's Signature              | Initials                       |                               |                                    |

**ADDRESS**

32692

**TITLE**

METHODS OF MAKING PHOSPHOR BASED LIGHT SOURCES HAVING AN INTERFERENCE REFLECTOR

|                                       |   |   |
|---------------------------------------|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>770 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
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|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |
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